

FICER'S BATTERY REPORT
HICAGO POLICE DEPARTMENT

RD NO

HY210364

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION

AME (LAST - FIRST - M.I.)

STEGMILLER, ROBERT J

PAR NO.

18764

POSITION

POLICE OFFICER

ATE OF APPOINTMENT

10-JUL-1995

EMPLOYEE NO.

[REDACTED]

VIT OF ASSIGNMENT

311

BEAT/CALL NO.

6710G

EX

1. M

2. F RACE HISPANIC

DOB

[REDACTED]

EIGHT

510

WEIGHT

180

TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED

1. ON DUTY

A. UNIFORM, PATROL DUTY
 B. UNIFORM, OTHER DUTY

Describe _____

C. CITIZEN'S DRESS

D. TACTICAL

E. B.I.S. UNIT

F. SPECIAL EMPLOYMENT

G. OTHER _____

WORKING

A. ALONE
 B. WITH ONE PARTNER
 C. WITH MULTIPLE PARTNERS

How many? 2

PATROL TYPE

A. SQUAD CAR
 B. FOOT
 C. BICYCLE
 D. APV/MOTORCYCLE
 E. SQUADROL
 F. OTHER

TYPE OF ACTIVITY

A. AMBUSH -NO WARNING

B. TRAFFIC STOP/PURSUIT

C. INVESTIGATING SUSPICIOUS PERSON

D. DISTURBANCE - DOMESTIC

E. DISTURBANCE - MENTAL PATIENT

F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER

G. DISTURBANCE - OTHER

H. MAN WITH A GUN

I. PURSUING/ARRESTING OFFENDER (Specify)

CHARGE 720 ILCS 5.0/12-2-B-4-AGG
ASSAULT/PEACE OFFICER/WEAPON

IUCR CODE ASSAULT - AGGRAVATED
PO: HANDGUN

J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify)

ORIGINAL CHARGE _____

ORIGINAL IUCR CODE _____

K. OTHER _____

TYPE OF INJURY TO OFFICER

A. FATAL

B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/
Internal Injuries)

C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions)

D. NONE APPARENT/NONE

LIGHTING CONDITIONS AT INCIDENT

A. DAYLIGHT

D. DUSK

B. NIGHT

E. ARTIFICIAL LIGHT

C. DAWN

1. POOR

2. GOOD

INCIDENT INFORMATION

1. INDOOR

2. OUTDOOR

ADDRESS OF OCCURRENCE

6152 S ROCKWELL ST

CITY CHICAGO

STATE (if outside Chicago) _____

LOCATION CODE

330-OTHER

BEAT OF OCCURRENCE

0825

DATE OF OCCURRENCE

04-APR-2015

TIME

16:18:00

DAY OF WEEK

SATURDAY

NO. OF OFFICERS BATTERED 3

WERE THERE ASSISTING UNITS ON SCENE? 1. YES 2. NO

IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT
AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS)? 0

MANNER OF ATTACK

01. SHOT

02. SHOT AT

03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT)

04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT)

05. OTHER (INCLUDING VERBAL THREATS)

TYPE OF WEAPON/THREAT

(Check all that apply):

A. FIREARM CALIBER

D. HANDS/FISTS

B. GUNPOUNDS

E. FEET

C. KNIFE/OTHER CUTTING INSTRUMENT

F. MOUTH (SPIT, BITE, ETC.)

D. SHOTGUN

G. VERBAL THREAT (ASSAULT)

E. OTHER

H. OTHER (SPECIFY)

B. VEHICLE

I. PULLED PO TO GROUND

C. KNIFE/OTHER CUTTING INSTRUMENT

J. BLUNT INSTRUMENT

FIREARM USE INFORMATION

(Check all that apply):

A. OFFICER AT GUNPOINT

B. OFFICER'S OWN WEAPON OBTAINED

C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON

OFFENDER INFORMATION

SEX

1. M

2. F

RACE

BLACK

DOB

CB NO

IR NO.

WAS THE OFFENDER'S ACTIVITY:

DRUG RELATED?

1. YES

GANG RELATED?

2. NO

2. NO

3. UNKNOWN

3. UNKNOWN

NO. OF OFFENDERS PRESENT? 3

WEATHER CONDITIONS

A. CLEAR

D. FOG/HAZE

B. RAIN

E. SNOW

C. SNOW

F. SEVERE CROSS WIND

APPROXIMATE OUTDOOR TEMPERATURE 70

1074534

Attachment 15

REPORTING MEMBER - SIGNATURE
STEGMILLER, ROBERT J

STAR NO.
18764

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.
CALLOWAY, KEITH A

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